



Montana Public Safety Officer Standards & Training Council

2260 Sierra Road East
Helena, MT 59602

Phone: (406) 444-9975
Fax: (406) 444-9978

NOTICE OF OFFICER HIRE/TERMINATION

Please write or print legibly.

- | | |
|--|--|
| <input type="checkbox"/> Peace Officer | <input type="checkbox"/> Public Safety Communication Officer |
| <input type="checkbox"/> Corrections/Detention Officer | <input type="checkbox"/> Motor Carrier Services Officer |
| <input type="checkbox"/> Coroner | <input type="checkbox"/> Deputy Coroner |
| <input type="checkbox"/> Reserve Officer | <input type="checkbox"/> Adult Probation & Parole Officer |
| <input type="checkbox"/> Other | <input type="checkbox"/> Juvenile Probation & Parole Officer |

FOR POST USE ONLY
Officer ID No.

Agency Name _____
Address _____

HIRE

Officer's Last Name First Name MI

Date of Birth _____

Date of Hire _____

Rank/Title _____

Previous Employer _____

Dates employed at previous agency
from _____ to _____

TERMINATION

Officer's Last Name First Name MI

Date of Birth _____

Dates of Employment from _____ to _____

Rank/Title _____

Class of Termination

<input type="checkbox"/> Resigned	<input type="checkbox"/> Deceased
<input type="checkbox"/> Retired	<input type="checkbox"/> Medically Disabled
<input type="checkbox"/> Involuntary	

I certify the above information is true and meets the requirements of the State of Montana and the POST Council.

Official Name (Sheriff, Police Chief, Mayor, etc.)

Date

**This form is to be completed and forwarded to the POST Council
at the above address within 10 days of hire or termination.**